

JAN 05 2007

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being
facsimile transmitted to the United States Patent and
Trademark Office (Fax No. 571-273-8300) on:

1/5/2007
(Date)

Sharon A. Shelton
Sharon A. Shelton

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

Application of:

Applicant : Robbins, Jeffrey
Serial No. : 10/798,037
Filed On : March 11, 2004
Title : CARDIAC-PREFERRED GENETIC ALTERATION OF
TRANSGENIC RABBITS
Docket No. : CHM02-GN054
Examiner : Chen, Shin Lin
Art Unit : 1636

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313

Dear Sir:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 C.F.R. § 1.97, the Examiner's attention is directed to the references listed on the attached Forms PTO-SB-08A and 08B. A copy of each of the non-patent listed references is provided.

It is to be understood that the present disclosure of art is in no way intended to be a waiver of any arguments or defenses available to the Applicant under the rules of the U.S. Patent and Trademark Office and the statutes of the United States. Furthermore, pursuant to 37 C.F.R.

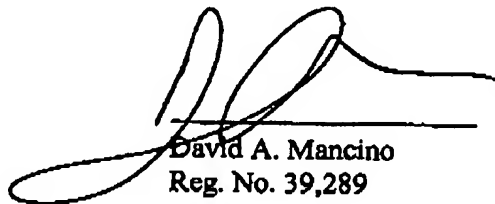
{W0868100.1}

Information Disclosure Statement
CHM02-GN054
Page 2

RECEIVED
CENTRAL FAX CENTER
JAN 05 2007

1.97(c) and 1.17(p), this Information Disclosure Statement must be accompanied by payment of the required fee of \$180.00. The Commissioner is hereby authorized to charge any additional fees that may be required by this paper, or to credit any overpayment to Deposit Account 50-3072.

Respectfully submitted,



David A. Mancino
Reg. No. 39,289

030074
TAFT, STETTINIUS & HOLLISTER LLP
425 Walnut Street, Suite 1800
Cincinnati, OH 45202-3957
(513) 357-9331
mancino@taftlaw.com

{W0868100.1}2

JAN 05 2007

Substitute for form 1448/PTO

INFORMATION DISCLOSURE
STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 2

of

2

Application Number

10/798,037

Filing Date

03/11/2004

First Named Inventor

Robbins, Jeffrey

Art Unit

1632

Examiner Name

Chen, Shin Lin

Attorney Docket Number

CHM02 GN054

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
		FENTZKE et al, Dilated Cardiomyopathy in Transgenic Mice Expressing a Dominant-Negative CREB Transcription Factor in the Heart, J.Clin.Investigation, 1998, p2415-2426, 101-11.	
		KIMBALL et al, Effect of Digoxin on Contractility and Symptoms in Infants with a Large Ventricular Septal Defect, Am. J. Cardiol, 1991, p1377-1382, 68.	
		KIMBALL et al, Age-Related Variation in Contractility Estimate In Patients < 20 Years of Age, Am. J. Cardiol, 1991, p1383-1387, 68.	

Examiner
Signature

Date

Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.88. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.